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WILLAHASSEE FISHMIN

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## COVER LETTER

TO: Amendment Section
Division of Corporations

. . . .

NAME OF CORPORATION: POLICE GOOGLESTIC
DOCUMENT NUMBER: DIT DODD 13458
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person  Rallegh General Store INC  Firm/ Company  PO: Box EIM  Address  Williston Fl 321696  City/ State and Zip Code  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Latosha W. Iliams  at (352) 792-7353  Name of Contact Person at (352) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

17 OCT IN PH 3: 36

TALLAHASSI PLANTE

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(Name of Corporation	ion as currently fil	ed with the Florida	Dept. of Sta	ite)	
- Paliegh	Ganara'	slove rporation (if known)	INC.	(DOCHE	Sinari
(Docu	ment Number of Co	rporation (if known)			45
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this <i>Flor</i>	ida Profit Corporat	ion adopts th	e following ame	endment(s) to
A. If amending name, enter the new name of the c	orporation:				
	}			Tha	ba -3a - a
name must be distinguishable and contain the wo "Corp" "Inc" or Co.," or the designation "Corpword "chartered," "professional association." or the	2. " "Inc. " or "Co"	4 professional co	corporated" orporation na	or the abbrev	new iation in the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	e: DRESS)	NA	<del></del> -		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO		NIA			 
D. If amending the registered agent and/or registered new registered agent and/or the new registered	red office address i	n Florida, enter th	e name of the	<u>e</u>	
Name of New Registered Agent	N/A	·			
	(Florida street ac	ddress)	<u> </u>		
New Registered Office Address:	NIA			•./A	
Ness Registerea Office Address.	(Ciny	)	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing Re	gistered Agent:				
I hereby accept the appointment as registered agent.	1 am familiar with i	and accept the oblig	ations of the <sub>i</sub>	position.	
	N/A	ered Agent, if chang			
Sign	nature of New Regist	ered Agent, if chang	ting		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: $\underline{X}$ Change	<u>PT</u> <u>John Doe</u>	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	VP John A. Craig Ir	11851 NE 116+43+ Williston FL32618
Add X_ Remove		10:1115460 FL32618
2) Change Add	5 John A. Craiger	7493 NE. Hwy41 Williston F1 32696
Remove 3) Change Add	<del></del>	
Remove 4) Change Add		
Remove  5) Change Add		
Remove 6) Change Add		
Remove		

	lding additional Arti sheets, if necessary).	(Be specific)		77 (1		
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071310113 [0] []]]	provides for an exchaplementing the amenable, indicate N/A)	inge, reclassifi idment if not c	cation, or can ontained in th	cellation of issue e amendment i	ied shares. <i>N</i> tself:	/A
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
· · · · · · · · · · · · · · · · · · ·	
Effective date if applicable: 101117 (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature Signature	<del>_</del>
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
Title of person signing)	<del></del>